

**Please consider my application to the Chatham-Kent Food Policy Council.**

I represent the following:

☐ Organization/sector: (please specify)

☐ General Community:

**Contact Information – Please Print:**

<b>Name:</b>			
	(last name)		(first name or chosen name)
<b>Address:</b>			
	<b>Apartment/Unit #</b>	<b>PO Box</b>	<b>Rural Route</b>
	<b>City/Town</b>		<b>Postal Code</b>
<b>Please provide <u>only</u> your preferred method of contact:</b>			
<b>Telephone:</b>	<b>Home</b>		<b>Cell</b>
	<b>Work</b>		
<b>Email address:</b>			

Are you 18 years of age or older?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have knowledge and understanding that is relevant to the Chatham-Kent Food Policy Council?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**NOTE:** YOU MAY ALSO ATTACH ADDITIONAL RESPONSES IF MORE SPACE IS REQUIRED.  
APPLICANTS ARE ENCOURAGED TO INCLUDE A RESUME.

**Committee Involvement**

Have you participated as a member on a Municipal Board/Committee in the past 5 years ☐ Yes ☐ No

If yes, please list:

Briefly state your reasons and interest in applying for appointment to the Chatham-Kent Food Policy Council:

What experience do you have that is relevant to the Chatham-Kent Food Policy Council? This can be personal and professional.

## Outreach Initiatives

How did you learn about this position? (Please check all that apply)

- ☐ CK Public Health's Website
- ☐ Let's Talk Food Website
- ☐ CK Public Health's Social Media
- ☐ Through a Community Organization
- ☐ Word of Mouth
- ☐ Other (please specify):

## References:

Please include the names and contact number(s) of two (2) references that may be contacted respecting your application.

Name	Contact Number(s) and/or Email
1.	
2.	

## Declaration (please read carefully)

I declare all the information I provided is true. I understand misrepresentation may result in my application not being considered.

Completed by: (print name)	
Date completed:	
Signature:	

## Application Deadline

Interested in applying and have questions, or need help filling out this application form? Please contact Chatham-Kent's Food Policy Council Coordinator:

Phone: 519.352.7270 ext. 2496

Email: [FoodPolicyCouncil@chatham-kent.ca](mailto:FoodPolicyCouncil@chatham-kent.ca)

**Please submit your completed application and attachments to Chatham-Kent's Food Policy Council Coordinator:**

**In Person:** Chatham-Kent Public Health Unit; 435 Grand Ave, W Chatham, ON N7M 5L8

**Email:** [FoodPolicyCouncil@chatham-kent.ca](mailto:FoodPolicyCouncil@chatham-kent.ca)

If you are sending your application via email and do not receive a reply from us within a week, please call us to confirm we've received your application.

Personal information, as defined by Section 2(1) of the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) is collected under the authority of the Municipal Act, 2001, and in accordance with the provisions of the MFIPPA. Personal information on this form will be used to assess the candidate's qualifications for appointment to one of the various committees or boards. Personal information may form part of meeting agendas and minutes and therefore may be made available to members of the public at the meetings, through requests, and through the website of the Corporation of the Municipality of Chatham-Kent. Questions regarding the collection, use, and disclosure of this personal information may be directed to the of Information Coordinator, Clerk's Office, 315 King St. P.O. Box 640, Chatham On N7M 5K8, 519.360.1998

Adapted from the "Application for Citizen Appointment" from the Municipality of Chatham-Kent.